

HIDE THIS SLIDE

ON SOME SLIDES ALL OF THE NOTES WILL NOT PRINT WITH THE SLIDE, FAMILIARIZE YOURSELF WITH THE INFORMATION OR COPY AND PASTE THE NOTES INTO A WORD DOCUMENT. ALL OF THE INFORMATION IN THE NOTES SECTION MAY NOT BE APPROPRIATE FOR YOUR INTENDED AUDIENCE.

WWW.CHPPM.COM

Version Updates

01.06 - Baseline new version

PREFACE PRESENTATION

- Many of the graphics in this presentation are animated GIFs or animated graphics. They will not animate unless you view in Screen Show. Slide transitions are not recommended.
- Many of the briefing slides have extensive briefer notes. The notes provide much more information than is needed for the audience.
- It is recommended that you edit the briefer notes to suit your requirements and level of expertise in the subject matter.
- **Tailor this briefing to meet YOUR needs based upon your audience and time allotted.** Hide the slides that are not used. There is no “one size fits all” briefing. We have provided many slides for your use with the expectation you will not use all of them.
- Unless this publication states otherwise, masculine nouns and pronouns do not refer exclusively to men.
- Use of trade or brand names in this publication is for illustrative purposes only and does not imply endorsement by the Department of Defense (DOD).

PREFACE IMPROVEMENTS

- Users of this publication are encouraged to submit comments and recommendations to improve the publication. Comments should include the version number, page, paragraph, and line(s) of the text where the change is recommended. The proponent for this publication is the United States Army Center for Health Promotion and Preventive Medicine (USACHPPM). Comments and recommendations should be forwarded directly to:
Commander, USACHPPM, ATTN: MCHB-CS-OHI, 5158 Blackhawk Road, Aberdeen Proving Ground, Maryland 21010--5403, or by using the E-mail address on the USACHPPM website at:
<http://usachppm.apgea.army.mil/mtb/>
- If you develop new slides or revise existing slides, please forward to USACHPPM for future updates of this briefing.
- We will post future updates on the USACHPPM Internet site:
<http://usachppm.apgea.army.mil/mtb/>

UNCLASSIFIED

COBRA GOLD 2006 PREVENTIVE MEDICINE

Presenter's Name

**Presenter's Command
Local Contact Information**

Prepared by:

**U.S. Army Center for Health Promotion and Preventive
Medicine**

(800)222-9698/ DSN 584-4375/ (410)436-4375

<http://usachppm.apgea.army.mil>



AGENDA

- Purpose
- Background
- Review of Guide to Staying Healthy
- Preparation for Deployment
- Deployment
- Post Deployment
- Summary
- Conclusion



PURPOSE

Inform Personnel Deploying to
Exercise Cobra Gold 2006 of
the Potential Health Hazards
and the Individual
Countermeasures Necessary to
Assure Personal Safety and
Health



BACKGROUND

- US Forces are deploying in support of Cobra Gold 2006
- Environmental, safety, and occupational health hazards are a potential medical threat to deployed personnel



Historical accounts of wars, battles, and military training consistently show that the greatest loss of forces was not caused by combat wounds – rather the majority of losses were the result of disease and non-battle injuries (DNBI).



BACKGROUND

The Armed Forces of Thailand, Singapore and the United States will conduct Exercise Cobra Gold in Thailand. Cobra Gold is a regularly-scheduled joint/combined exercise and is designed to ensure regional peace and strengthen the ability of the Royal Thai Armed Forces to defend Thailand or respond to regional contingencies.

THAILAND

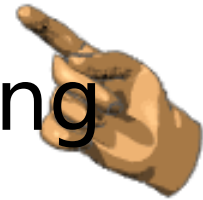
- Industrial Growth
- Environmental Challenges



GUIDE TO STAYING HEALTHY

GTA 08-05-062

- Unfold YOUR *Thailand: Deployment Health Guide*
- Personal Protective Measures (PPM)
 - Individual Countermeasures
- Reference Guide for this Briefing



This guide is for use by all active/reserve component military, civilian, retiree, and contractor personnel. Anyone who trains for, or participates in any type of military operation should keep and refer to this guide.

PREPARING TO DEPLOY

- Medical, Dental & Vision Screening (Soldier Readiness Processing)
- Prepare clothing and gear and personal hygiene items
- Complete Pre-deployment Health Assessment (DD Form 2795)
- Immunizations and chemoprophylaxis
 - Begin malaria chemoprophylaxis when directed by medical authority



During medical screening, discuss prescribed medications with the examiner; obtain at least a 90-day supply of medications

PREPARING TO DEPLOY

ADDITIONAL PACKING ITEMS:

- Cotton underwear (10 changes)
- Birth control supplies
- Personal hygiene products
- Anti-fungal cream/powder & shower shoes
- DEET insect repellent, sunscreen, eye and hearing protection



If you need medications or hygiene items which may not be available through normal supply systems, obtain a six-month supply, or enough for the duration of the operation

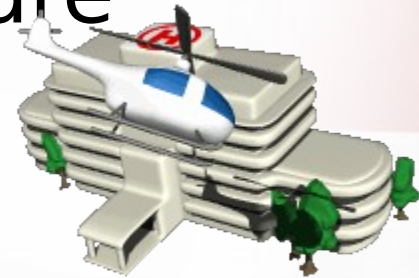
PREPARING TO DEPLOY FEMALE CONSIDERATIONS

- Birth control pills
- Feminine hygiene products (non-deodorant tampons, sanitary napkins, panty liners; menstrual cramp reliever)
- Yeast infection medication (two courses of vaginal treatment)
- Portable Urinary Device
 - For use by female personnel to reduce time needed to urinate and resolve privacy issues when latrines are not available (convoys, field operations)

If using birth control pills, continue as prescribed to regulate menstrual cycles and avoid problems resulting from inconsistent use

DEPLOYMENT HEALTH CARE

- Know where to seek health care when deployed
- May or may not be through same channels as your home station
- Maintain your health and seek care whenever an illness or injury occurs



PREVENTIVE MEDICINE COUNTERMEASURES

- Medical Tests – All Personnel
 - PPD – Purified Protein Derivative (TST – Tuberculin Skin Test)
 - Within 12 months prior to deployment
 - **AND** At time of redeployment
 - **AND** Again between 3-6 months after redeployment
 - HIV – Human Immunodeficiency Virus
 - Required every 2 years. Serum collection before deployment will be tested regardless of date of last test.
 - G6PD - Glucose-6-Phosphate Dehydrogenase
 - Prior to taking Primaquine (anti-malarial drugs are contra-indicated for G6PD deficient individuals)



TEST RESULTS

UNCLASSIFIED


IMMUNIZATION REQUIREMENTS

- All Personnel
 - Hepatitis A
 - Typhoid
 - Tetanus-diphtheria
 - Yellow fever
 - Meningococcal
 - Influenza (seasonal)
 - Measles, Mumps, Rubella (MMR)
- Selected Personnel
 - Hepatitis B (medics, MPs, firefighters, combat lifesavers)
 - Rabies (occupational risk of exposure)
 - Pneumococcal (asplenic personnel)
 - Anthrax (as directed from higher)
 - Smallpox (as directed from higher)

Delia

Confirm requirements with medical authority or OPORD

ANTI-MALARIAL MEDICATION

- Anti-Malaria Medication (as directed)
 - malaria prophylaxis for deployments is guided by the G1 in its publication of the [personnel policy guidance](#) (PPG), Chapter 7, not by the CDC
 - **Take anti-malaria medication as directed by your health care provider** 
 - Malaria kills at least 1 million people each year worldwide (World Health Organization)

FIELD SANITATION TEAM

- Field Sanitation Teams (FST) train unit personnel in Preventive Medicine Measures (PMM) and advise the commander and unit leaders on implementation of unit-level PMM.
- Know who the members of your Field Sanitation Team are PRIOR to deployment
- The FST can assist in preventing medical threats to your health
- Deploy with all FST equipment



Failure to apply PMM increases the risk of mission failure

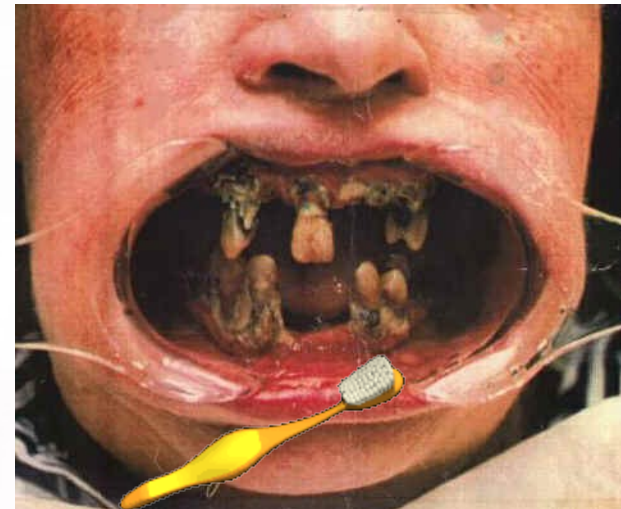
PERSONAL PROTECTIVE MEASURES

- Wash hands frequently
- Do not rub eyes or inside of nose with bare finger(s)
- Bathe/shower regularly (field expedients will do); use unscented products
- Wear shower shoes to prevent athlete's foot
- Dry thoroughly after showering
- Sleep head-to-toe if billeted in common areas
- Wear clean, dry uniforms; change socks daily and uniform at least weekly
- Do not wear nylon or silk undergarments; cotton undergarments are more absorbent and allow the skin to dry
- Seek prompt medical care if problem exists



ORAL HEALTH

- Deploy with:
 - Toothbrush
 - Dental Floss
 - Fluoride Toothpaste
- Brush twice-daily
 - Daily in difficult tactical environments
- Floss daily
- Seek medical attention at the onset of any dental problems



SPIRITUAL HEALTH

- Maintain personal prayer/meditation
- Obtain and read wholesome religious/spiritual literature
- Attend religious/spiritual group discussions/studies
- Process anger, fear, anxiety & guilt through personal & group spiritual/religious activities
- Keep in touch with spiritual advisors/chaplains



NUTRITION

- Drink fluids regularly (hourly fluid intake should not exceed 1.5 quarts, daily fluid intake should not exceed 12 quarts)
- Maintain weight; do not avoid food or attempt weight loss during a deployment
- Work in cold weather can increase energy needs by 10-25%
- Operations in high-altitude areas can increase energy needs by 50% or more



SMOKING

- March – August 2003: 19 cases of severe pneumonia in service members deployed to Southwest Asia
 - 16 smokers, 8 *began smoking during the deployment*
 - Two pneumonia deaths
- January 2004: 2 new severe cases of pneumonia
 - *Both began smoking during this deployment*



If you don't smoke, don't start during a deployment.

If you do smoke, quit.

STRESS

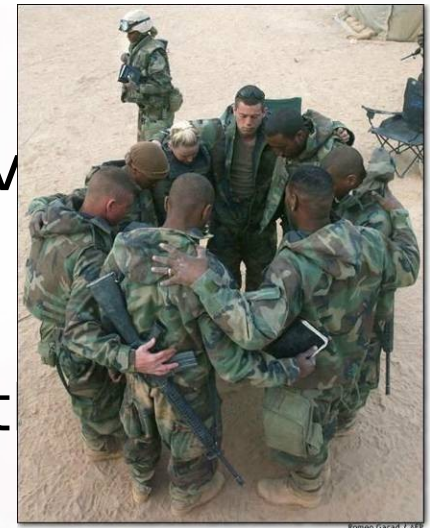


- Operational stressors
- Different types and intensities
- Recognize the symptoms of depression
- Seek or encourage help
- Take steps to reduce operational

Stress can be intensified for personnel who are exposed to or observe human suffering and/or death

IMPROVE RESISTANCE TO STRESS

- Fear and physical signs or symptoms of stress are normal reactions before and during combat or other dangerous/life-threatening situations
- Talk about what is happening with your buddies
- Learn ways to relax quickly
- Quickly integrate new replacements
- If you must join a new group, be active in establishing friendships
- Give each other moral support
- Care for your buddies and work together



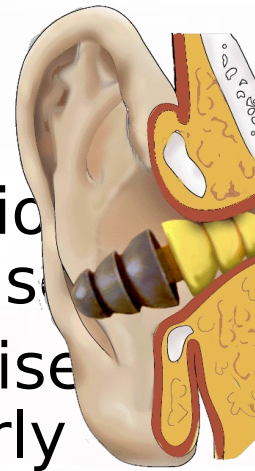


HEARING CONSERVATION

- Loud noise causes permanent hearing loss

COUNTERMEASURES

- Have your hearing protection with you at all times and use it
- Be sure your ear plugs, noise muffs or helmets fit properly and are in good condition
- Avoid noise or limit time around noise to only critical tasks



Combat
Arms
Ear plug

NSN 6515-
01-466-
2710



Authorized
wear

IAW AR 670-1

**If you have to raise your voice to be understood,
it is too noisy.**

Put on hearing protection.

VISION CONSERVATION

- **Preventive Measures and Eye Protection**
 - Contact lens use is prohibited for use in environments where exposure to smoke, toxic chemical vapors, sand, or dust occurs
 - If required, maintain 2 pair of glasses and 1 protective mask insert
 - Use eye protection when in any potentially eye hazardous environment
 - Safety goggles or spectacles with side shields*
 - Chemical splash goggles*



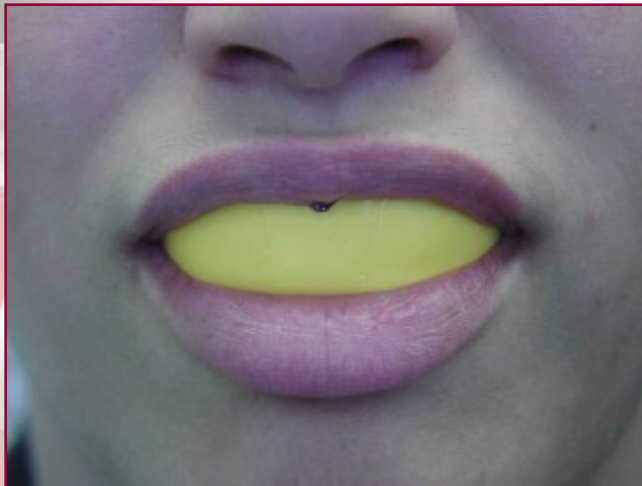
*(ANSI Z87.1 approved)



**Vision Ready is
Mission Ready!**

MOUTH GUARDS

Use This



OR

Lose These



Physical Environment

- Topography

- Terrain: central plain; Korat Plateau in the east; mountains elsewhere
- Elevation extremes:
lowest point: Gulf of Thailand 0 ft
highest point: Doi Inthanon 8,500 ft

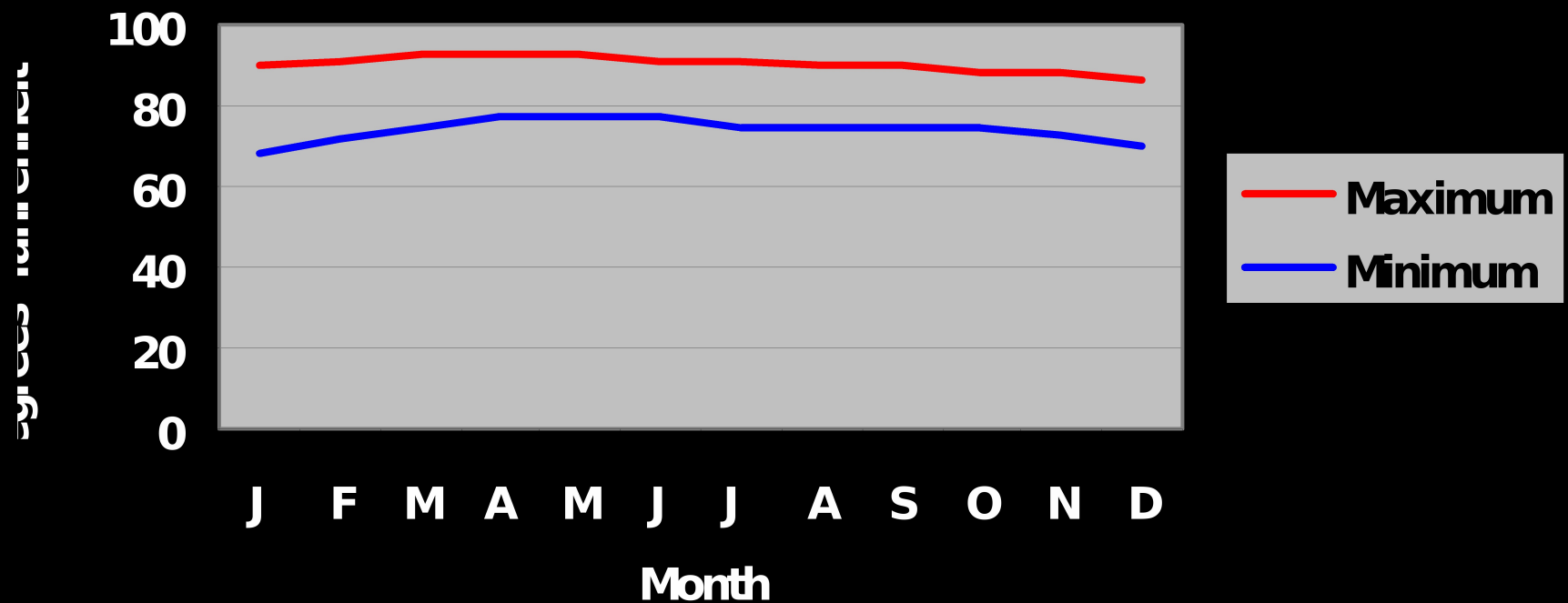
- Climate

- Tropical; rainy, warm, cloudy southwest monsoon (mid-May to September); dry, cool northeast monsoon (November to mid-March); southern isthmus always hot and humid



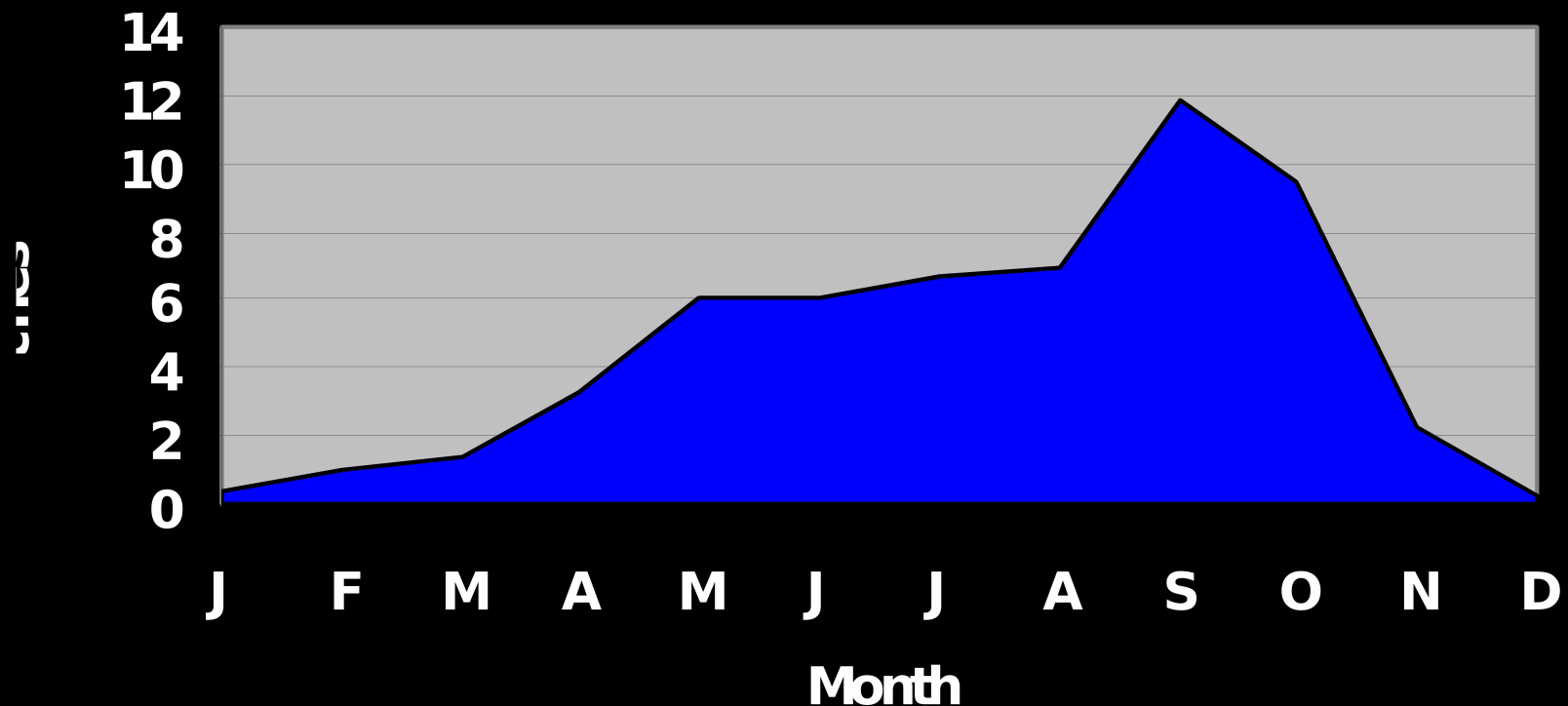
Physical Environment

Average Max/Min Temperature in Bangkok



Physical Environment

Average Total Precipitation in Bangkok



HEAT INJURY PREVENTION

- Heat Cramps, Exhaustion, or Stroke



COUNTERMEASURES

- Drink fluids continuously (hourly fluid intake should not exceed 1.5 quarts, daily fluid intake should not exceed 12 quarts)
- Maintain acclimatization
- Protect yourself from exposure to sunlight and wind
- Maintain good physical condition
- Establish work/rest schedules
- Wear proper clothing
- Participate in training



You should receive annual unit training on prevention of heat injury. Heat injuries are preventable!

HEAT

H: Heat category – WBGT Index

E: Exertion level (prior 3 days)

A: Acclimatization

T: Tables – Water/Work/Rest



REMEMBER

Water requirements are not reduced by any form of training or acclimatization.

Units which have soldiers who do not drink because they do not have opportunities to urinate have a leadership problem.

Work/Rest and Water Consumption Table

Applies to average sized, heat-acclimated soldier wearing BDU, hot weather. (See TB MED 507 for further guidance.)

Easy Work	Moderate Work	Hard Work
<ul style="list-style-type: none"> • Weapon Maintenance • Walking Hard Surface at 2.5 mph, < 30 lb Load • Marksmanship Training • Drill and Ceremony • Manual of Arms 	<ul style="list-style-type: none"> • Walking Loose Sand at 2.5 mph, No Load • Walking Hard Surface at 3.5 mph, < 40 lb Load • Calisthenics • Patrolling • Individual Movement Techniques, i.e., Low Crawl or High Crawl • Defensive Position Construction 	<ul style="list-style-type: none"> • Walking Hard Surface at 3.5 mph, ≥ 40 lb Load • Walking Loose Sand at 2.5 mph with Load • Field Assaults

- The work/rest times and fluid replacement volumes will sustain performance and hydration for at least 4 hrs of work in the specified heat category. Fluid needs can vary based on individual differences ($\pm \frac{1}{4}$ qt/hr) and exposure to full sun or full shade ($\pm \frac{1}{4}$ qt/hr).

• **NL** = no limit to work time per hr.

• **Rest** = minimal physical activity (sitting or standing) accomplished in shade if possible.

• **CAUTION: Hourly fluid intake should not exceed 1½ qts.**

Daily fluid intake should not exceed 12 qts.

• If wearing body armor, add 5°F to WBGT index in humid climates.

• If doing Easy Work and wearing NBC (MOPP 4) clothing, add 10°F to WBGT index.

• If doing Moderate or Hard Work and wearing NBC (MOPP 4) clothing, add 20°F to WBGT index.

Heat Category	WBGT Index, F°	Easy Work		Moderate Work		Hard Work	
		Work/Rest (min)	Water Intake (qt/hr)	Work/Rest (min)	Water Intake (qt/hr)	Work/Rest (min)	Water Intake (qt/hr)
1	78° - 81.9°	NL	$\frac{1}{2}$	NL	$\frac{3}{4}$	40/20 min	$\frac{3}{4}$
2 (GREEN)	82° - 84.9°	NL	$\frac{1}{2}$	50/10 min	$\frac{3}{4}$	30/30 min	1
3 (YELLOW)	85° - 87.9°	NL	$\frac{3}{4}$	40/20 min	$\frac{3}{4}$	30/30 min	1
4 (RED)	88° - 89.9°	NL	$\frac{3}{4}$	30/30 min	$\frac{3}{4}$	20/40 min	1
5 (BLACK)	> 90°	50/10 min	1	20/40 min	1	10/50 min	1

For additional copies, contact: U.S. Army Center for Health Promotion and Preventive Medicine Health Information Operations Division at (800) 222-9698 or CHPPM - Health Information Operations@apg.amedd.army.mil.

For electronic versions, see <http://chppm-www.apgea.army.mil/heat>. Local reproduction is authorized.

June 2004



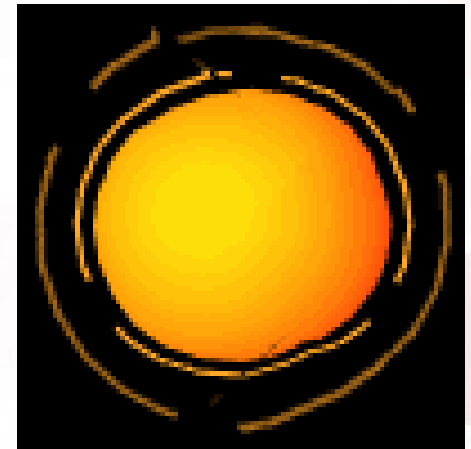
CP-033-0404

SUNBURN

- Prevent overexposing skin and eyes to solar radiation and wind

COUNTERMEASURES

- Use sunscreen and lip balm
- Use protective eyewear
- Limit exposure
- Cover nose and mouth to limit drying



Sunburn reduces soldier readiness and increases the likelihood of skin cancer.

Environmental Health Risk

- **Greatest short-term health risks**
 - Ingestion of food or water contaminated with fecal pathogens
 - High heat and humidity
- **Greatest long term risks are associated with pollution and chemical contamination of food/water**



Infectious Disease Risk

- **HIGH RISK** for infectious diseases
- Disease risk will seriously jeopardize mission effectiveness unless force health protection measures are implemented

ARMED FORCES MEDICAL INTELLIGENCE AGENCY

Infectious Diseases

- Foodborne and Waterborne Diseases
 - **HIGH RISK** = Diarrhea, Hepatitis A
 - **INTERMEDIATE RISK** = brucellosis, typhoid/paratyphoid
- Force Health Protection (FHP) Priorities
 - Deploy appropriate PM personnel and equipment
 - Consume food, water, ice only from US-approved sources
 - Operate food preparation facilities in accordance with Army doctrine
 - Ensure proper hand washing facilities near all latrines and dining facilities and enforce

Infectious Diseases Cont.

- Vector-borne Diseases
 - **HIGH RISK** = Dengue fever, Malaria, Japanese encephalitis
 - **INTERMEDIATE RISK** = Chikungunya, Rickettsioses, Typhus
- FHP Priorities
 - Use DEET on all exposed skin
 - Treat field uniforms with permethrin
 - Use bed nets in field conditions, treat with permethrin
 - **Enforce anti-malarial medications as directed in Army Personnel Policy Guidance, Ch 7, 7-6**



<http://www.armyg1.army.mil/MilitaryPersonnel/ppg.asp>

PERSONAL PROTECTIVE MEASURES



**Permethrin
On
Uniform**

+



**DEET On
Exposed
Skin**



**Properly
Worn
Uniform**

**MAXIMUM
~~PRO~~TECTION**

DOD Insect Repellent System

YOU NEED TO KNOW...

Dry cleaning removes permethrin from the uniform

INSECT REPELLENTS FOR SKIN AND CLOTHING

DEET lotion



NSN 6840-01-284-
2002



- Apply a thin coat to EXPOSED skin

- One application lasts up to 12 D

Permethrin

- Individual Dynamic Absorption Kit (IDA)

- Treatment lasts for over 50 launderings



NSN 6840-01-278-
1336



NSN 6840-01-345-
0237

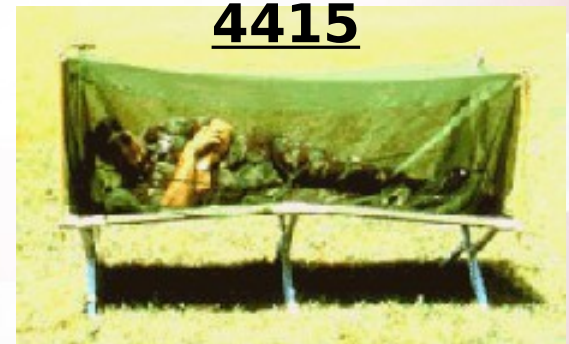
- Aerosol spray can
- Treatment lasts through 5-6 washes

OTHER INDIVIDUAL COUNTERMEASURES

- Wash and inspect your body for insects/ticks and bites daily
- Use buddy system to check clothing routinely
- Launder uniform routinely to remove insects and eggs
- Order a permethrin-impregnated bed net for use while sleeping
 - Otherwise, treat a bed net before use by spraying the outside of the net with permethrin
 - Tuck edges under cot or sleeping bag
 - Don't let net touch you while you sleep

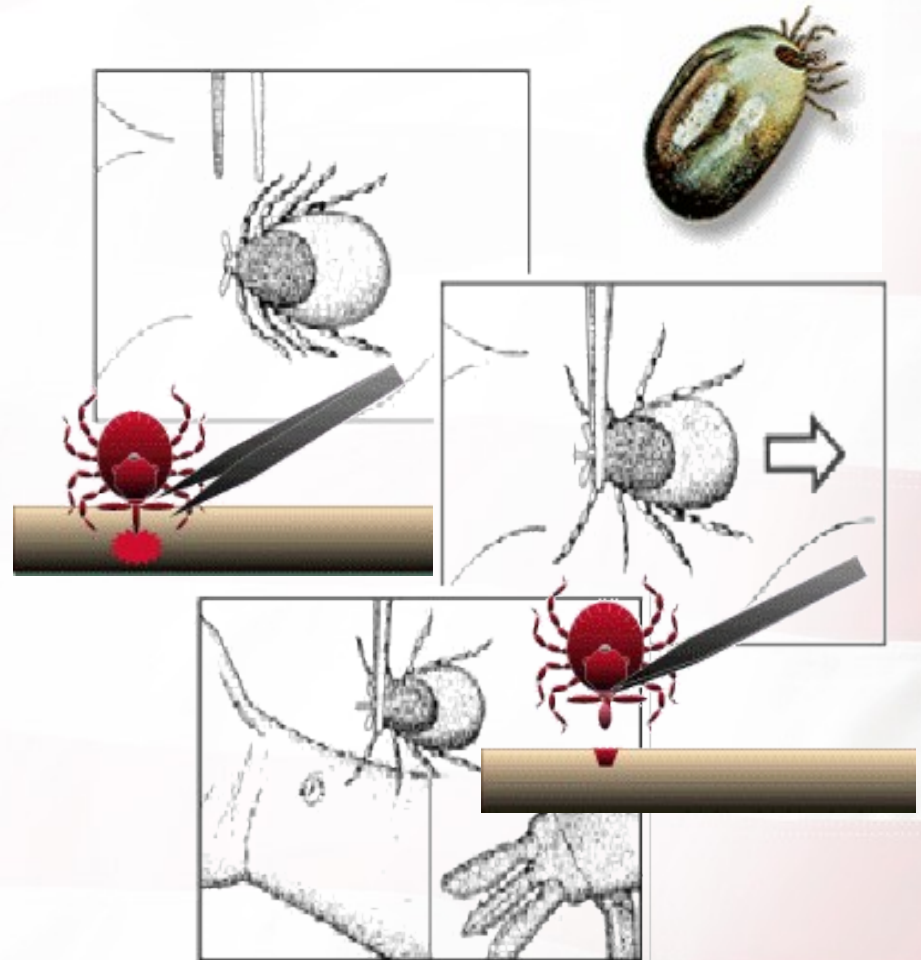


NSN 3740-01-516-4415



TICK REMOVAL PROCEDURES

- Use fine-tipped tweezers to grasp mouthparts
- Grasp mouthparts against skin surface
- Pull back slowly and steadily with firm tension
- Avoid squeezing tick
- Wash wound and apply an antiseptic



Infectious Diseases Cont.

- Animal-contact Diseases
 - **HIGH RISK** = Rabies
 - **INTERMEDIATE RISK** = Avian Influenza, Q Fever
- FHP Priorities
 - Avoid all animal contact
 - No mascots
 - Report all animal bites and scratches

What not to do!



Infectious Diseases Cont.

- Sexually Transmitted Diseases
 - **HIGH RISK** = Hepatitis B
 - **INTERMEDIATE RISK** = Gonorrhea/chlamydia, HIV/AIDS
- FHP Priorities
 - Use Condom Sense!
 - Avoid sexual contact
 - Use latex condoms if sexually active



Infectious Diseases Cont.

- Water-contact Diseases
 - **HIGH RISK** = leptospirosis
 - **INTERMEDIATE RISK** = schistosomiasis
- FHP Priorities
 - avoid unnecessary contact with lakes, rivers, streams, and other surface water

There will not be a sign like

this.
WARNING!

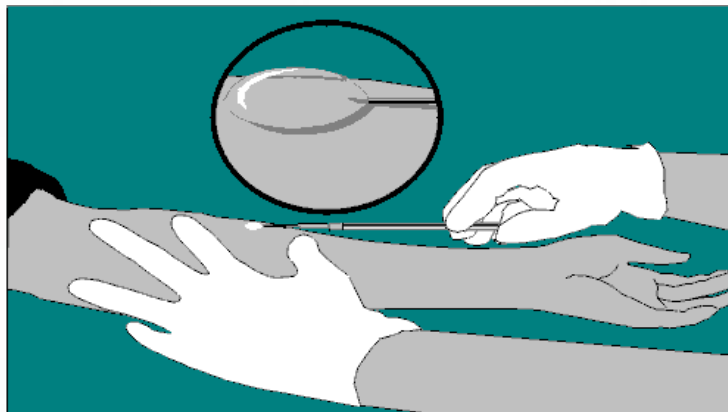
LEPTOSPIROSIS
HEALTH HAZARD

FRESH WATER STREAMS AND MUD
POSSIBLY POLLUTED WITH BACTERIA

SWIM, BOAT,
OR HIKE AT YOUR OWN RISK

Infectious Diseases Cont.

- Respiratory Diseases
 - **INTERMEDIATE RISK** = tuberculosis, melioidosis
- FHP Priorities
 - Tuberculin skin test before and after deployment
 - Avoid close contact with local population



Hazardous Animals & Plants

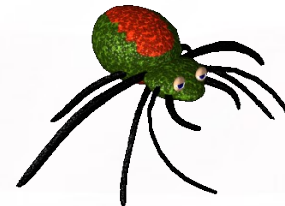
- Animals

- Rabid animals snakes, centipedes, spiders

- Plants

- FHP Priorities

- Do not handle animals
- Shake out boots, clothing, & bedding
- Do not touch, chew, eat, or burn unfamiliar plants



UNCLASSIFIED

D

HAZARDOUS MARINE ANIMALS



LIONFISH



CONESHELLS



SHARKS



SEA SNAKES



SEA URCHINS



CORALS/ANEMONES

UNCLASSIFIED

D

VENOMOUS SNAKES



KING COBRA



BLACK COBRA



CORAL SNAKE



KRAIT



KEELBACK



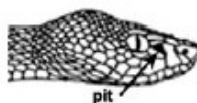
PIT VIPERS



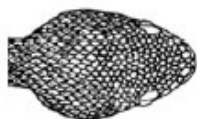
PIT



Long, hinged fangs that tuck into roof of mouth when not in use.



Vertically elliptical eye pupils; pit vipers with heat sensing organ between eye and nostril.



Broad triangular head very distinct from narrow neck.

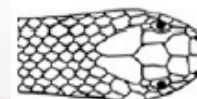
COBRAS/KRAITS/CORAL SNAKE



Short fangs fixed in erect position in front of mouth.



Round eye pupils.



Head small and not distinct from the body.

HAZARDOUS PLANTS

- Plant resins cause skin irritation
- Poisonous roots, stems, leaves, and fruit
- Weeds and stinging nettles
- Thorny shrubs and trees



Poisonous Plants



*Mucuna
pruritem*

Systemic



*Elephant's
Ear Plant*



Rattan Palm

Thorny Plant

Punctures and
Abrasions

COUNTERMEASURES

- Avoid touching unfamiliar plants
- Use clothing as protective barrier
- Rinse skin promptly after exposure
- Wash clothing after contact
- Never eat any part of unfamiliar

OCCUPATIONAL HEALTH PRE-DEPLOYMENT

- Current industrial hygiene review of operations
- Engineering controls
- Supply of required personal protective equipment (PPE)
- Hazard communication (HAZCOM) training
- Personal protective equipment training
- Current medical surveillance



OCCUPATIONAL HEALTH DEPLOYMENT

- Occupational Health Hazards
- Use your applicable control strategies
 - Elimination or substitution
 - Engineering control
 - Work Practices and administrative controls
 - Personal Protective Equipment
- Follow the PPE program requirements



U

IE

FIELD FACILITIES

CONTROL OF HAZARDOUS EXPOSURES

- Garrison facilities include engineering controls to control chemical exposures
- In the field, additional efforts are needed to provide the same level of control for these occupational exposures
- Install and use safety countermeasures



OCCUPATIONAL HAZARDS

- Exhaust from engines and fuel space heaters
- Gases from weapons firing
- Solvents used to clean weapons
- Chemicals and metals from vehicles and equipment
- Greases and oil from vehicle maintenance repair
- Detergents used to clean equipment
- Fuels and refueling operations
- Weapon systems: radiation energy, shock, vibration, noise

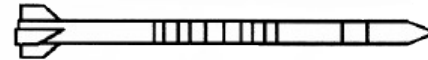


DEPLETED URANIUM (DU)

- Depleted uranium (DU) is used in armor-piercing munitions and in enhanced tank armor protection
- DU can cause adverse health effects if it enters your body (inhaled, ingested, fragments).



COUNTERMEASURES



- Receive Depleted Uranium Awareness Training
- Assume a DU contamination zone of 50 meters around actively burning fires involving any armored combat vehicles
- As with all battlefield debris-do not touch or move the object
- Notify authorities of the location of any debris
- Exercise standard field hygiene, to include washing hands and face
- No additional protective measures are required for handling unfired DU munitions other than those required for all munitions



CAVES

- Rabies from bat bites
- Tick-borne – Relapsing Fever
- Histoplasmosis from bat guano
- Confined Space Issues
 - Poor air exchange/ventilation
 - Asphyxiant gasses and/or low oxygen level
 - Ordnance/munitions
 - Other hazardous chemicals and materials stored in the caves



POST DEPLOYMENT



- Complete Post-Deployment Medical Health Assessment (DD FORM 2796)
- Receive post-deployment preventive medicine briefing
- Receive post-deployment screening, testing, and follow-up
- Continue anti-malaria medication as directed
- If sick after returning home, tell your physician that you were deployed

POST DEPLOYMENT

- Continue to seek counseling from Chaplain or medical personnel
- Homecoming Stress
 - Don't expect things to be exactly the same, especially if long deployment
 - Ease back into roles; don't rush it
 - Children may be withdrawn
 - Spouse may be moody or depressed
 - Financial and property issues may require immediate attention



SUMMARY

- Review of *Deployment Health Guide*
- Preparation for Deployment
- Deployment
- Medical Threat
- Post Deployment



CONCLUSION

- Health threat awareness and implementation of associated countermeasures discussed in the briefing are critical to all military missions (including combat, support, and sustaining base military and civilian forces). Apply this information during all phases of military operations, including training, pre-deployment, deployment, and post-deployment.





Contact Your Local Preventive Medicine Service or Medical Support Unit for Additional Information



Prepared by:
U.S. Army Center for Health Promotion and Preventive
Medicine

(800) 222-9698/ DSN 584-4375/(410) 436-4375

<http://usachppm.apgea.army.mil>